

DEXTROAMPHETAMINE SIDE EFFECTS

emotional disorders, either of a primary or secondary order, it is necessary to be quite careful in making observations about changes in behavior, both desirable and undesirable. Extreme care should be taken to assess the underlying personality organization of patients before administering the drug, and to continue frequent reassessment of those children in whom integration of personality seems tenuous. It should be noted that other psychostimulants—for example, Ritalin—have also been implicated in causing such disturbances.⁴ In our clinical experience, these severe side effects appear to have occurred with much less frequency with methylphenidate than with dextroamphetamine. However, this is only a clinical impression which has not been carefully documented.

The cause for this disorganizing influence in some patients is not clear. However, recent studies

have suggested that hyperactive children may vary in their baseline level of autonomic nervous system function, and it is conceivable that further disorganization of thought processes takes place. Additional research is needed to establish the presence of such a relationship between clinical behavior and autonomic function.

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Management of Essential Tremor

I believe that the differential diagnosis of essential tremor versus parkinsonism is one that every practicing internist has probably fairly frequently faced in his practice, particularly if he has middle-aged or elderly people, as most of us do. Everyone, I think, recognizes the parkinsonian tremor and almost invariably recognizes it correctly . . . I'd like you to emphasize in your analysis of the parkinsonian patient, not so much the tremor (which is the obvious thing that grandmother recognizes and the next-door-neighbor knows what's wrong with the patient as soon as you do) but to emphasize something that in its early manifestations is more subtle, and yet, in terms of therapy, much more important . . . and that is the rigidity and slowness of muscle movement that is the earliest manifestation almost invariably of parkinsonism. This often antedates the occurrence of tremor and sometimes is far more profound, in fact, than the tremor, although the reverse also may occur. This is important because, in its early manifestations, although relatively easy to diagnose if you think to look for it, it is usually easy to miss if you don't have it in mind. And the reason that this is important from the standpoint of essential tremor is that it is the single most important distinguishing factor between the disorder "essential tremor" and the disorder "parkinsonism"; and both have absolutely different therapeutic implications.

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